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CONTENTS.

ORIGINAL COMMUNICATIONS.

- On Cholera Infantum. By A. I. Cummings, M.D., Roxbury, Mass. 341
Throat Diseases, and their Treatment. By Ira Warren, M.D., Boston 344
Treatment of Dysentery. By S. B. Chase, M.D., Portland, Me. 350

SELECTED PAPERS.

- Dr. Bacleley's Lectures on the Reciprocal Agencies of Mind and Matter. (Continued) 351

EDITORIAL, AND MED. INTELLIGENCE.

- Circular of the Committee of the American Medical Association on the Radical Cure of Hernia 355

- Medical Society of North Carolina—Miasmatic Origin of Diseases 354
Beck's Materia Medica 356
Natural History of the Human Species 357
History of the Mass. General Hospital 357
New Medical Works 358
Microscopic Preparations 358
Bronchial Syringes 358
Dr. Coles's Philosophy of Health 358
Life Insurance explained 358
Medical Miscellany 358
Suffolk District Medical Society 358
Notices to Correspondents 359
Weekly Report of Deaths in Boston 359
Circular of the Committee of Publication of the American Medical Association 359
Dysentery at the West 359

MEDICAL SCHOOL OF MAINE.—The Medical Lectures at Bowdoin College will commence on *Wednesday*, the 11th day of February, 1852.

- Theory and Practice of Medicine, by WILLIAM SWEETSER, M.D.
Anatomy and Surgery, by EDMUND R. PEARLEE, M.D.
Obstetrics and Diseases of Women and Children, by ANOS NOURIE, M.D.
Materia Medica and Therapeutics, by CHARLES A. LEE, M.D.
Chemistry and Pharmacy, by PARKER CLEAVELAND, M.D.
Medical Jurisprudence, by Hon. JOHN S. TENNEY, M.A.

The Library, containing about 3400 volumes, principally modern works—and the Anatomical Cabinet, are annually increasing.

Every person becoming a member of this institution, is required *previously* to present *satisfactory* evidence of possessing a good moral character.

The amount of fees for the Lectures is \$50, payable in advance. Graduation fee, including Diploma, \$18. The Lectures continue fourteen weeks.

Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

P. CLEAVELAND, Secretary.
Brunswick, Nov. 1851. N12—cawt

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CITY OF BOSTON.—City Physician's Office and Vaccine Institution, No. 31 Court Square.
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Residence 95 Salem Street.
March 12—eoptf

GENEVA MEDICAL COLLEGE. *Spring Course for 1852.*—The next annual course of Lectures will commence on the first Wednesday of March, 1852, and continue sixteen weeks.

- CHARLES BRODHEAD COVENTRY, M.D., Prof. of Midwifery and Diseases of Women and Children.
JAMES HADLEY, M.D., Prof. of Chemistry.
JAMES WEBSTER, M.D., Prof. of Anatomy and Physiology.
CHARLES ALFRED LEE, M.D., Prof. of Materia Medica and General Pathology.
JAMES BRYAN, M.D., Prof. of Surgery.
WILLIAM SWEETSER, M.D., Prof. of the Theory and Practice of Medicine.
GEORGE W. FIELD, M.D., Demonstrator of Anatomy.

Fees for the course, \$62; Matriculation fee, \$3; Dissection fee, \$3. Graduation fee, \$50.

Price of board, from \$1.50 to \$2.50 per week. Further information may be obtained by addressing JAMES HADLEY, M.D., Geneva.

CHARLES A. LEE, M.D.,
Dean of the Faculty.
Geneva, Oct. 6, 1851. [O15—3t&copJ11Mh]

PRIZE ESSAY ON CROUP.—The Boston Society for Medical Observation have not yet awarded the Prize, which was offered six months ago for the best practical *Treatise on Croup and its Treatment*. The same Prize is again proposed, and the period of competing for it extended to the first of January next.

All Dissertations must be accompanied by a sealed packet, on which shall be written some device or sentence, and within shall be enclosed the author's name and residence. The same device or sentence is to be written on the Dissertation to which the packet is attached. All unsuccessful dissertations will be deposited with the Secretary of the Boston Society for Medical Observation, from whom they may be obtained with the sealed packet, unopened, if called for within a year after they have been received. All dissertations, moreover, must be *legibly* written, and forwarded, free of expense, by the first of January next, to one of the following gentlemen, who have been requested to act as judges.

- JOHN WARE, M.D.,
President Massachusetts Med. Soc.
JOHN JEFFRIES, M.D.,
President Suffolk District Med. Soc.
EDW. H. CLARKE, M.D.,
Sec'y Boston Soc. for Med. Observation.
No prize will be awarded if no dissertation is thought worthy of one. Aug. 6—10cog

MEDICAL JOURNAL ADVERTISING SHEET.

BOYLSTON MEDICAL SCHOOL, INCORPORATED, 1847.—The Fall Session of this School will commence on the first of September, 1851. Its object is to give as complete a course of instruction by recitations, lectures and practical study, as can be given in this country in a period of three years. The plan of the School differs from that of any other School in the country, and with the advantages held out by them, the instructors hope to send into the profession thorough students only.

SPECIAL COURSES OF LECTURES are delivered before the School upon
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Diseases of the Ear by *Dr. E. H. Clarke.*
Surgery and Bandaging by *Dr. H. G. Clark.*
Auscultation and Percussion by *Dr. Thayer.*

Further information may be obtained by application to any of the instructors.

JOHN BACON, JR., M.D., Instructor in Chemistry and Toxicology, 20 Crescent Place.

CHARLES E. BUCKINGHAM, M.D., Physician to the House of Industry, Instructor in Obstetrics and Diseases of Women and Children, 5 Harrison Avenue.

EDWARD H. CLARKE, M.D., Instructor in Materia Medica and Therapeutics, and Aural Surgery, 21 Rowe street.

W. HENRY THAYER, M.D., Instructor in Pathology and Legal Medicine, 100 State street.

HENRY G. CLARK, M.D., one of the Surgeons of the Massachusetts General Hospital, Instructor in Principles and Practice of Surgery, 10 Salem street.

HENRY W. WILLIAMS, M.D., Instructor in Principles and Practice of Medicine, and Ophthalmic Surgery, 10 Essex street.

GEORGE H. GAY, M.D., Instructor in Anatomy, Hollis street, corner of Tremont.

JOHN C. DALTON, JR., M.D., Professor of Physiology at the Boston Medical College, Instructor in Physiology and Microscopy.

Catalogues containing the plan and objects of the School, may be had on application at the bookstore of George W. Briggs, 72½ Washington street, under the room of the School; at the bookstore of Ticknor, Reed & Fields, corner of Washington and School streets; and at Joseph Burnett's, Apothecary, 23 Tremont Row.

ROBESON LEWIS, President.
 Boston, Aug. 20, 1851. tf

DISEASES OF THE EYE AND EAR.—*Dr. J. H. Dix* will, from this date, relinquish general practice, and attend exclusively to the medical and surgical treatment of Diseases of the Eye and Ear. Tremont street, opposite Tremont House.

February 14, 1853. eptf

DISEASES OF THE THROAT AND LUNGS, INHALATION, &c.—The Subscriber continues to treat these diseases by Inhalation of the powder of the Nitrate, Lycopodium, &c., also with the Laryngeal Shower Syringe and Frothing.

Inhalers, with the Powder, will be sent, by Express or otherwise, as ordered, to any part of the country, to physicians or patients. I have found this powder highly serviceable in ulcerated sore throat, bronchitis, laryngitis and incipient phthisis, and the testimony of several physicians who have tried it in various places has been greatly in favor of its use.

W. M. CORNELL, M.D.,
 Oct. 23—eptf 426 Washington st., Boston.

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Jan. 23.—tf 160 Washington St.

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Nov. 13.

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Nov. 6.

NOTICE TO PHYSICIANS AND THE PUBLIC GENERALLY.—The subscriber, aware of the adulterations practised in preparing and powdering Drugs and Medicines for the market, and the difficulty experienced in distinguishing the pure, has arranged to have most of these articles powdered in his establishment. Samples of drugs in their original state will be kept for comparison, and he has requested *Dr. A. A. Hays, State Assayer*, to analyse at any time such preparations as may appear of doubtful genuineness, before offering them for sale, thereby insuring to physicians pure drugs and medicines.

WM. BROWN,
 481 Washington, corner of Elliot street.

N. B.—With the above arrangement all can be supplied with pure and undiluted medicines. Physicians of Boston and vicinity are invited to call and examine the above arrangement, and see samples of pure drugs and medicines. No one allowed to put up prescriptions except those of long experience and perfect masters of their profession.

The sale of all Fancy Goods and Confectionery is discontinued on the Sabbath. Prescriptions and family medicines sold as usual on that day.

Sept. 4.

POND & MORSE—Dealers in Genuine Drugs, Medicines, &c., Main Street, Boston. Physicians furnished as above at the lowest Boston prices. A large assortment of Glass Ware, Surgical Instruments, &c., always on hand.

N. B.—Patent Medicines not manufactured or sold. Sept. 1, 1851. 810—tf

ROBINSON'S PATENT FERRY—may be obtained, Wholesale and Retail, of Aaron P. Richardson, M.D., No. 36 Green street, Boston.

May 29—tf

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Dr. J. C. B. Williams, an eminent English physician, after prescribing it in 400 cases of consumption (in 234 of which he preserved full notes), states in the London Journal of Medicine—“As the result of experience, confirmed by a rational consideration of its mode of action, the pure fresh oil from the liver of the cod is more beneficial in the treatment of pulmonary consumption, than any other agent, medicinal, dietetic, or regimental, that has yet been employed.”

June 18—tf

ELIXIR OF OPIUM—Made from the formula of the Philadelphia Journal of Pharmacy, and is intended to be a substitute for the “popular” medicine called McMan's Elixir. This is a preparation of Opium without Narcotine, and the strength is the same as Tinct. Opi. Manufactured by **PHILBRICK, CARPENTER & CO.**

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MICROSCOPES.—Joseph Burnett, No. 23 Tremont Row (Agent for the sale of Spencer's Microscopes), has just received two instruments from this celebrated maker, which he offers for sale.

Also, a full assortment of Alexander Heath's Preparations of Microscopic Anatomy. Jc25—tf

GERMAN SALACINE—For sale at 160 Washington st., by **PHILBRICK, CARPENTER & CO.**

Oct. 16.

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Oct. 16. 160 Washington st.

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References.—*Drs. J. C. Warren, M. S. Perry, J. Mason Warren, S. B. Townsend, H. Storer, and J. V. C. Smith, Editor of the Boston Medical and Surgical Journal.*

Jan. 13.—edw19r

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XLV.

WEDNESDAY, NOVEMBER 26, 1851.

No. 17.

CHOLERA INFANTUM.

BY A. I. CUMMINGS, M.D., ROXBURY, MS.

[Communicated for the Boston Medical and Surgical Journal.]

Of all the diseases to which children, and especially infants, are liable, particularly in summer and the first months of autumn, cholera is by far the most fatal. It has been truly said that this disease is indigenous to the United States, as it has not been described in many, if any recent works of foreign authors. Even the late work of Dr. West, on the Diseases of Children, though excellent in all other respects, contains no history of cholera infantum as it is seen by every practitioner daily, especially in our New England cities. But so extensive and frequent has this disease become among us, as to demand every attention that can be given to it by the profession. It is the scourge of childhood.

Among the *causes* of cholera infantum, in my humble opinion there is none more conducive to its devastations than *over-feeding*. The anxious mother seeing her child laboring under other predisposing causes, and perhaps weak and feeble, imagines the "dear little thing" needs more nourishment, and consequently she is never satisfied unless when loading the already weak stomach of her darling with some nice preparation to "give it strength," not realizing that she is to see her kind and unwearied endeavors, and anxious solicitude, rewarded only by a fearful and often fatal disease! She does not realize that she is killing her child with kindness! The effect of heat, sudden changes in the temperature of the atmosphere from wet to dry, and the reverse, together with another powerfully exciting as well as predisposing cause, *dentition*, are all at work preparing for the attack of cholera, and smothering the vital powers so as to render the system in the most favorable position for the onslaught of disease. Not unfrequently for some length of time the little patient is fretful and irritable before the disease appears in its worst form. Or, the child may have diarrhoea to even an alarming extent, and still the fond parent "hopes it will go off soon," or charges it to *teething*. She has seen many other children who had diarrhoea while teething, and yet they "got well." But disease is hourly making fatal inroads upon the vitality of the child, and the storm is gathering and near at hand that will in its fury destroy the tender flower, however

fondly it may be cherished! In this, as well as in other diseases of a fatal character, *prevention* is all-important—ininitely more so than any specific. I have said the disease is often insidious; behind the scene, however, lurks the destroyer! Infantile cholera may come on suddenly, with vomiting, purging, and all the other symptoms of the disease, or it may supervene on an attack of simple diarrhœa, when some exciting cause rouses the destroyer to action. Usually the irritability of the stomach, producing vomiting of everything taken, is one of the most difficult symptoms to treat, and stands in the way of all efficient medication. The least particle of medicine or anything else, thrown upon the stomach, is immediately rejected. Meantime repeated discharges are often ejected from the bowels, sometimes with a force and velocity truly astonishing. The discharges at first may be yellow, or of a greenish appearance, but they soon become small in quantity, colorless, inodorous, and thin or containing minute mucous flocculi. In children of 2 or 3 years old, the green stools may retain their appearance for some length of time; but in infants it is otherwise. There is usually but little tormina or tenesmus at first, so far as we can judge by appearances, but when the bowels become corroded, as it were, and the delicate mucous membrane irritated extensively, or destroyed in the rectum at least, then there is undoubtedly severe suffering, if we may judge by our knowledge of adult cases.

The *countenance* of the child laboring under cholera is peculiar, and resembles so nearly that of its prototype in the adult, true cholera, as seldom to be mistaken. The peculiar pinched, haggard, cadaverous look of the child is almost always present, especially in the last stages, and may be considered with propriety as almost pathognomonic of the disease. Indeed, the practitioner will seldom be long in forming his diagnosis when he sees the peculiar countenance. The low, agonizing moan of the child tells but too plainly that disease has gained a fast foothold upon its tender subject, and that its sinking vital powers cannot long survive the shock. The prognosis is *always unfavorable* after the disease has made any considerable progress. The great proportion of fatal cases in this disease assures us but too plainly how little power the healing art has, to allay the symptoms and successfully combat and counteract their dire effects. Inordinate thirst harasses the little patient incessantly, and yet, the moment any liquid is taken it is rejected by the irritable stomach and thrown off. Fever, and a quick pulse, the abdomen tense, the body becoming rapidly and extremely emaciated, the eyes glassy and sunken, the head hot, and extremities not unfrequently cold—these, with other symptoms, assure us that *something must be done* and that *speedily*, or our little patient will die. Towards the last he becomes drowsy, with his eyes half closed or rolled upward in their sockets, and we are assured that the brain is becoming involved, and in a short time convulsions or torpor and coma come on, and death closes the scene. In many cases the child dies from inanition. Towards the termination of the disease the child often suffers from retention of urine; and may not a want of action in the kidneys have something to do in producing coma, as in the case of adults?

I have said that something must be done, and that speedily, or it will be of no avail. What, then, is the best *treatment* of the disease? As cholera in the adult is the "*opprobrium medicorum*," since no plan of treatment ever devised by the faculty has answered the great *desideratum*, so it is in this disease a fact, that medicine has been of but little avail, except in the commencement of the attack. It becomes necessary, first, to devise some plan to *check the vomiting*. To this end various means have been resorted to. A few drops of spts. terebinth., acet. plumbi in solution, camphor in solution, with æth. sulph., tr. opii in drop doses, cold coffee, clear—brandy in very small doses, blisters to the epigastrium, fractions of a grain of calomel, often repeated, leeches to the epigastrium, sinapisms to epigastrium, &c. &c.—all these, and other means that may occur to the practitioner, may be useful in different cases. My chief dependence is in drop doses or less of tinct. opii, leeches to the epigastrium, or sinapisms to epigastrium, with a few drops of pure brandy, repeated *pro re nata*. Lime water or some other alkaline preparation is necessary when there is acidity of the stomach producing green stools. The mist. carb. calcis, combined with tr. rhei dulc. in equal proportions, answers this indication. When there is much heat and febrile excitement, sponging the body with tepid water, or the warm bath used with prudence, are beneficial; but the warm bath is a most powerful engine of mischief when carried to too great an extent. It depletes the vital powers too rapidly to make its application very safe in cases of infants. If the gums are inflamed and swollen, scarification is necessary; and if the teeth are pressing hard, they should be let through by the faithful use of the gum-lancet. This is an important point, and should never be neglected; for if so, fearful results may follow. If the abdomen is swollen or tense, fomentations of hops or bitter herbs may be found useful; but they should not be permitted to become cold, for if they do, the effect may be deleterious. I prefer in most cases the application of warm flannels, or the camphorated oil rubbed gently over the surface of the abdomen. The patient must be kept warm and comfortable, and cold air excluded as much as possible, lest a sudden chill should prevent the success of our remedies.

To arrest the discharges from the bowels, and give tone to the system, is now the great desideratum. To accomplish this, many articles of our extensive and valuable materia medica have been put in requisition. Among these articles, *calomel* stands at the head, with very many excellent physicians. But I confess I, for one, have not so strong faith in its infallibility as I had even a few years ago. I have seen it given, and given it myself, when it answered a valuable and I believe saving purpose; but I have oftener been dissatisfied with its use. Whenever I do give mercury in any form to children in this disease, I prefer the hydr. cum creta in small doses. My chief dependence, I confess, especially in the later stages, are brandy as a stimulant, tannin as an astringent, and a powder of ext. hyos. and calc. magnes. (equal parts) in grain doses, repeated according to circumstances, as a sedative and antacid. The acet. plumbi I also value highly as an astringent. Spts. nit. dulc., mist. camph. and liq. acet. ammonia, I also value where the fever is

high, skin hot, and urine small in quantity, high colored, or completely suppressed. Brandy (that is free from acid) may be given in doses of a few drops, four or five to ten, according to age, and as often as is necessary. The following I have found generally useful. R. Tannin, ip. et op. pulv., āā gr. xij. ; calc. magnes, ʒ ss. M. Ft. chart. no. xij. One every three or four hours. Or—R. Acet. plumbi, pulv. hyos. et magnes,* sacch. alb., āā gr. xij. M. Ft. chart. no. xij. One as above. If it is desirable to exhibit these articles in a fluid form, we may give the following—R. Tannin, gr. xvj. ; tr. op. camph., gtt. xlviij. ; mucil. acaciæ, ʒ jss. ; syr. ulmi, ʒ ss. M. This may be given in teaspoonful doses to a child of 1 year old and upwards, as often as is necessary to stop the frequency of the discharges, and induce rest. The child, if nursing, should be suffered to draw but small quantities at once, nor should he be fed with any preparation but sparingly. The best food for a young child is equal parts of milk and water, well boiled and sweetened with white sugar so as to be palatable. To this may be added lime water, if it is necessary to counteract acidity, and it forms a good vehicle for the administration of other remedies. With regard to *blisters* in any diseases of children, I am fearful of mischief when using them. Not long since I saw a most horrid abuse of blisters in the case of a child, and I have no doubt that had it not been for them the child might have lived. Gangrene and sloughing were the results. When applied, it should be only for a few hours at most, and then emollient poultices will be sufficient to raise the vesicles.

But after all that can be said of the treatment of cholera infantum, by far the best plan is to *remove the patient, if in a city, to the country as soon as the first symptoms of the disease appear*. His chance is small in the city at the best, especially in the more densely-populated portions. In the country he will have *pure air* ; pure milk, fresh, and unadulterated with chalk or dirty water ; and there, if in any place, will he recover and regain his health, and cause the tender parents to rejoice in his rescue from an early grave. But with proper care here, and proper nourishment given in small quantities, and *at proper times*, many children are permitted to enjoy good health, however exposed they may be to the contamination of noxious gases, and impure air.

Such is cholera infantum ; and as it seems to increase in violence and in extent every year, especially in our cities, let medical men study its history, and *means of prevention*, as well as its treatment, faithfully disseminate the *truth* in relation thereto, and thus may they confer lasting blessings and receive the gratitude of suffering humanity.

November, 1851.

THROAT DISEASES.

[Communicated for the Boston Medical and Surgical Journal.]

FOLLICULITIS.—This disease made its appearance in this country, so far as is known, in 1830, and the attention of the profession was first

* Ext. hyosciami and calc. magnes., aa one ounce or more, and mix well.

drawn to it, as a *distinct disease*, in 1832. Some have supposed its origin to have had a hidden connection with the epidemic influenza, which spread over the civilized world in 1830; but this is only conjecture. In its early developments, it attracted notice chiefly by its visitations upon the throats of the clergy. Hence its popular name of "*clergyman's sore throat*." It was soon found, however, to attack all classes of persons, whether engaged in any calling requiring a public exercise of the voice or otherwise. It was more noticed by public speakers and singers, by reason of the greater trouble it gave them.

The disease consists simply in a chronic inflammation of the mucous follicles or glands connected with the mucous membrane which lines the pharynx, larynx, trachea, &c. The office of these little glands is to secrete a fluid to lubricate the air-passages. When inflamed, it spreads an acrid, irritating fluid over surrounding parts, and excites an inflammation in them. This, if not arrested, ends in ulceration; the expectoration becomes puriform and undistinguishable from that of consumption, and the patient dies with all the symptoms of phthisis. Indeed, before its nature was understood by the profession, it was thought the most fatal form of consumption, because it could be affected only to a very small degree, if at all, by medicines taken into the general system.

When disease lays hold of those follicles in the larynx which supply a fluid for lubricating the vocal cords, and the secretion conducted to those instruments of speech is acrid and irritating, the voice becomes hoarse; and when at length the ulceration reaches the vocal ligaments themselves, the voice suffers a gradual, and finally a total extinction. I have treated a large number suffering entire loss of voice, and am happy to say it has been restored in every instance.

The approach of this disease is often so gradual as hardly to attract notice—sometimes for months or even years giving no other evidence of its presence than the annoyance of something in the throat to be swallowed or hawked up, an increased secretion of mucus, and a sense of uneasiness and loss of power in the throat after public speaking, singing, or reading aloud. At length, upon the taking of a cold, the prevalence of an epidemic influenza, or of an unexplained tendency of disease to the air-passages and lungs, the throat of the patient suddenly becomes sore, its secretions increased and more viscid, the voice grows hoarse, the difficulty of speaking is aggravated, and what was only an annoyance, becomes an affliction, and a source of alarm and danger. The disorder clearly belongs to the family of consumption, and needs early attention.

It is amusing to reflect upon the theories which writers were in the habit of constructing, a few years since, to account for the throat affection among the clergy. It was attributed by some to speaking too often, by others to speaking too loud. One class of writers thought it arose from high, stiff neck-stocks; another, from a strain of voice on the Sabbath to which it was not accustomed on other days.

The cause of the disease lies deeper than any of these trifling things. So far as ministers are concerned, it may be expressed in two words—*labor, anxiety*.

The clerical order are placed just where they feel the force of the

high pressure movements of the age. They are the only class of recognized instructors of adult men, and are obliged to make great exertions to meet the wants of their position. The trying circumstances in which they are often placed, too, in these exciting times, by questions which arise and threaten to rupture and destroy their parishes, weigh heavily on their spirits, and greatly depress the vital powers. And when we add to this the fickle state of the public mind, and the shifting, fugitive character of a clergyman's dwelling-place, and the consequent liability to poverty and want to which himself and family are exposed, we have a list of depressing causes powerfully predisposing to any form of disease which may prevail. As we have said, however, it is not the clergy only, but all classes of people who are afflicted with this dangerous malady.

The long and rather awkward name which Dr. Green has given to this disease is, Follicular Disease of the Pharyngo-Laryngeal Membrane. I call it Folliculitis, or, as this term does not describe its seat, follicular laryngitis, or follicular pharyngitis, according to its position.

Through a general lack of acquaintance with this disease, it has been often confounded with bronchitis. But bronchitis is an inflammation of the mucous membrane which lines the bronchial tubes, and of course has no existence except *below* the bifurcation of the trachea. In strictness it is not a throat disease at all.

Folliculitis is also often mistaken for laryngitis. But this latter disease is an inflammation spread over the mucous membrane of the laryngeal cavity. Bronchitis and laryngitis affect *mucous membranes*; folliculitis, the *follicles* of these membranes. Each is a separate disease, and they are easily distinguished by one who understands them. They are often complicated and unite in one subject.

There is yet another form of these chronic diseases, with which many are afflicted. Inflammation sometimes begins behind and a little above the velum palati, in the posterior nares, or back passages to the nose. Thus seated, it generally passes under the name of *catarrh in the head*. It often creates a perpetual *desire to swallow*, and gives the feeling, as patients express it, "as if something were sticking in the upper part of the throat." When the inflammation is of long standing, and ulceration has taken place, puriform matter is secreted, and drops down into the throat, much to the annoyance and discomfort of the patient. Many times the sufferer can only breathe with the mouth open. Upon rising in the morning, a great effort is generally required to clear the head, and the extreme upper part of the throat. Even distressing retching and vomiting are sometimes induced by the effort to clear the back nasal passages. There is occasionally a feeling of great pressure and tightness across the upper part of the nose; and the base of the brain sometimes suffers in such a way as to induce headache, vertigo and confusion. The smell is frequently destroyed, and sometimes the taste.

If the inflammation be in the pharynx or larynx, there is a similar sensation of something in the throat, but the desire is not so much to swallow it as to hawk it up.

Beside these chronic forms of disease, there are a number of acute

inflammations which attack the air-passages, and run a rapid and very dangerous course. Croup is well known as one of them. There is another, which attacks the mucous membrane of the larynx and epiglottis, which reaches also the sub-mucous cellular tissues of these organs, and which often proves fatal in a few hours. The effusion of serum into the epiglottis, in consequence of a high state of inflammation of that cartilage, causes it to stand upright, so that it cannot cover and protect the opening to the larynx; and the lips of the glottis, distended by the same cause, approach each other, thus closing up gradually the passage to the wind-pipe, and threatening immediate suffocation. It was this disease of which Washington died, as we learn from the clear account of the *symptoms* given by his medical attendants, though they mistook the disorder for another, the profession not being then acquainted with it.

Treatment of Throat Diseases.—Fifteen years ago, these disorders were thought to be incurable; and by all the appliances of medical art then known, they were so. But time has brought a successful method of treatment, as well as a clearer knowledge of their nature. The honor of first employing such treatment in this country belongs to Dr. Horace Green, Prof. of the Theory and Practice of Medicine in the New York Medical College. It had been previously used by Drs. Trousseau and Belloz, of Paris; but this detracts nothing from Dr. Green's just honors, as he had no knowledge of their discovery—for such it was—until after he had done the same thing on this Continent.

This treatment, as is generally known to the profession, consists in topical medication, or the applying of the remedy directly to the diseased part. The medicinal agent, more extensively used than any other, is a strong solution of nitrate of silver. This substance is not, however, adapted to every case—other articles succeeding better in some few instances. Modern chemistry has given us a variety of articles, from which the skilful physician may select a substitute, should the nitrate of silver fail. This article has, however, proved itself nearly a *specific* for inflammation of mucous membranes, acute or chronic, not connected with a scrofulous or other taint of the system; and where such taints exist, it will generally succeed, if proper constitutional remedies are used.

Instruments.—The instrument employed by most physicians is a piece of whalebone, bent at one end, to which is attached a small round piece of sponge. I formerly used this instrument myself, and am happy to know, that notwithstanding its defects, it was generally successful. Yet where the larynx has been highly inflamed, with a swollen and ulcerated condition of the epiglottis and lips of the glottis, I have found the singular powers of the argent. nitratis put at defiance by an irritation evidently produced by the sponge of the probang. Upon its introduction in such cases, the parts contract upon and cling to it, and suffer aggravated irritation, almost laceration, upon its withdrawal, however carefully effected.

A case of this sort occurred to me in the person of a gentleman of great moral and intellectual worth, a teacher of a classical school, to whom I was called in Plymouth county, in August, 1849. He was at

the point of death from starvation, not having been able to swallow anything, not even water, for a number of days. The epiglottis and lips of the glottis were much swollen and deeply ulcerated, and the whole pharyngo-laryngeal membrane involved in a high state of inflammation. The first two applications of the nitro-argentine solution, made to the isthmus of the fauces and pharynx on Saturday evening and Sunday, so far relieved him, that on Monday morning he drank, with a sense of unspeakable satisfaction, a tumbler of cold water. Before I could see him on Wednesday evening, however, he was again sinking, the full activity of the inflammation having returned; and every subsequent attempt to introduce the sponge, and to carry it down to the seat of the disease, caused such irritation as to exhaust the patient. He sank and died, leaving a void in his neighborhood which it will be hard to fill. I feel confident that with the instrument I am about to introduce to the notice of the reader, I could have reached the seat of the disease with so little disturbance of the parts, as to have saved his life.

Such defects in the probang led me to contrive an instrument, which I call a *Laryngeal Shower Syringe*. It is in the form of a syringe, the barrel and piston of which are of glass. To this is attached a small tube, made of silver or gold, long enough to reach and enter the throat, and bent like a probang, with a globe at the end, from a quarter to a third of an inch in diameter, pierced with very minute holes, which cover a zone around the centre, one third of an inch or more in breadth.

This silver globe I daily introduce into highly inflamed and ulcerated larynges, generally without any knowledge of its presence on the part of the patient, until the contained solution is discharged. A single injection throws a *very fine* stream through each of the holes in the globe, and thus all sides of the walls of the trachea are washed at once. Moreover, the smallness and smoothness of the bulb allows of its easy and painless passage through the rima glottidis, so as to bathe the walls of the trachea as low as the bifurcation, and even of the large bronchi. Physicians will understand the advantage of this in the case of ulcers low down in the trachea. They will see its advantage, too, in the case of croup in children, into whose larynges it is not easy to introduce the sponge.

The introduction of this instrument into the larynx is easy. Upon the approach of any foreign substance, the epiglottis instinctively drops down upon the entrance to the larynx, guarding it against improper intrusions. It has been found, however, that when the root of the tongue is firmly depressed, this cartilage cannot obey its instinct, but stands erect, its upper edge generally rising into view. Availing himself of this fact, the surgeon has only to depress the tongue with a spatula, bent at right angles, so that the hand holding it may drop below the chin out of the way, and as the epiglottis rises to view, slip the ball of the instrument over its upper edge, and then, with a quick yet gentle motion, carry it *downward* and *forward* between the lips of the glottis, and the entrance is made. I have often admired the heroic faithfulness of this epiglottic sentinel, who, when overborne by superior force, stands bolt upright, and compels us to enter the sacred temple of speech, *directly over his head!*

This instrument I have used with great satisfaction. A considerable number of physicians, in different States, have procured and are now using it.

For bathing the upper part of the throat, I construct it with a *straight* tube, with holes over the outer portion of the globe, and extending to the centre. This washes instantaneously the fauces and pharynx, without throwing the solution back upon the tongue.

Inflammations in the back passages to the nose, have been almost entirely inaccessible by any reliable healing agent, and consequently incurable. The probang could only reach a short distance, and caused great suffering. I have had this syringe constructed with a short bend, and the globe pierced with a few fine holes at the upper end. Carrying this globe up behind the velum palati, with a single injection I wash both passages clear through. I have had the pleasure of curing a large number of bad cases, of several years' standing, to the surprise and delight of the patients.

Many of these throat affections are connected with functional disturbance of the liver and stomach. In such cases the inflammation of the throat generally refuses to yield until the hepatic and gastric troubles are corrected. Indeed, in a majority of cases, the topical applications need to be accompanied, for the above as well as for other reasons, by a constitutional and alterative treatment.

One word respecting the tonsils. They are chiefly "an aggregated mass of mucous follicles"; and in many follicular diseases they are found enlarged, inflamed, and sometimes indurated. In such cases they secrete a thin, unhealthy, irritating fluid, which is spread over the throat, increasing and perpetuating its disease. Much of this secretion, too, finds its way into the stomach, and thence into the circulation; and I am not sure that many cases of scrofula are not engendered by the poison thus conveyed to the blood. At all events, the throat seldom gets well in such cases, until the tonsils are removed.

For the excision of these glands, I found the same lack of instruments, as for making topical applications to the throat. The only one which had any claims to regard, was the guillotine instrument, invented some years since by Caleb Eddy, Esq., of this city. It had, however, no facilities for drawing the tonsil forward. Generally, all that could be done with it was to *trim* the gland, which did little good, for it became again enlarged. I attached the bull-dog tenaculum to it, with which I have been able to draw the tonsil from between the pillars of the fauces, and cut it through the root, so as effectually to prevent a second growth. As there were still some defects in this instrument, I have prepared an entirely original one, with which the extirpation of these glands is so easy and expeditious, and withal so little to be dreaded by the patient, as to leave, I think, little further to be desired in this line.

As bearing directly upon this subject, I will add, that about three years since, Dr. Chambers, of London, reasoned that if nitrate of silver have a specific influence over inflammations of mucous membranes, it would cure bronchial consumption, and perhaps other forms of that

disease, if it could be got into the lungs. He accordingly made a powder of that article and lycopodium to be breathed into the lungs. His account of it was published in the London Lancet, and has appeared in this Journal.

In August, 1849, I prepared the same powder; and not only in the cure of bronchial consumption, but in the treatment of the *first* and *third* stages of the tubercular form of this disease, I obtain results from it which I can derive from no other article.

I also use lycopodium for preparing powders in the same way, with sulph. of copper, crystals of nitrate of mercury (sometimes useful in secondary syphilitic troubles of the throat), iodide of potassium, &c.

For breathing powders of every kind, I have constructed a neat inhaler, which consists of a glass tube and a receiver—the latter being something like a tube vial, perforated with holes around the lower end. The powder is poured into the receiver, which is placed in the larger tube, and twirled between the thumb and finger while inhaling.

In the bronchial forms of consumption, the local disease is confined to the mucous membranes; and in the tubercular type, the deposit *begins* upon the same tissue. Breathing medicine directly into the lungs is therefore the rational mode of attacking the local disease. The time must soon come when this form of treatment will be universally adopted. The mode of applying it will doubtless be improved, and the articles employed be multiplied. But we are on the right track, and the period may not be distant when this fearful malady, taken in proper season, will be held as curable as chronic diseases of the stomach or liver.

Boston, Nov. 8, 1851.

IRA WARREN, M.D.

TREATMENT OF DYSENTERY.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I notice the subject of dysentery is engaging the attention of your correspondents, and I cheerfully comply with the request to contribute my *mite* towards forming a nucleus, and shall joyfully hail any beacon that will more safely guide me in treating this terrible malady.

I have looked upon this disease as a consequent of hepatic derangement, generally, and have found my treatment more successful when my remedies have been thus directed. Heat and cold perform an important part in this, as in pulmonary difficulties—the liver laboring much harder in summer, and the lungs in winter; consequently we find this disease raging at the close of the warm season, after the liver has become congested by over-exertion. When this has taken place, its function is impaired, if not impeded, and its secretion becomes so morbid as to poison the blood, as evinced by inactive circulation and cutaneous exudation. This, therefore, predisposes the system, or any organ, to take on disease more readily, and from its corroding nature tends directly to inflame the lower bowels in its elementary passage. Putrid exhalation and impure water are also more abundant at this time, and these, combined with the

cool evening breezes of the season, which reduce the external heat rapidly, are the more frequently exciting causes—assisted, also, by crude food, when any has been taken, which is not unfrequently the case.

My treatment has been to give a liberal portion of hydrarg. in some form; and as acid is generally present, I prefer the hydrarg. c. creta, or pulv. hydrarg. c. soda, and follow this in six hours with ol. ric. combined with an opiate according to the amount of tenesmus: thus exciting the liver, and thoroughly but mildly sweeping the alimentary canal. I then give mucilages freely to protect the irritated membrane, and at the same time stimulate externally. I also administer anodynes if tormina is severe, preferring the pulv. ip. comp. if much fever, and a clyster of decoc. op. in starch, cool; and if great heat in rectum, cold. After the inflammatory symptoms have subsided, should the discharges become copious and watery, I prescribe astringents—either plumbi ac. or tannin.

This course has succeeded better in my hands than any other, in the ordinary form of this disease; yet stimulants given almost from commencement would only save from immediate death by prostration, as the disease presented itself here in the fall of 1849.

Yours,

S. B. CHASE, M.D.

Portland, Me., Nov. 17, 1851.

ON THE RECIPROCAL AGENCIES OF MIND AND MATTER.

[Continued from page 256.]

In mentioning *whatever exhausts organic nervous power*, as one of the physical causes of insanity, I find that I am concurring in opinion with Dr. Henry Monro, who, in a very able treatise recently published, asserts his opinion "that insanity is a disease of deficient nervous tone consequent on loss of vitality." Insanity is a disordered condition of the brain or mental instrument, manifesting itself in a disturbance of the *intellectual* faculties by what are termed hallucinations, or erroneous impressions or delusions (and designated *intellectual* insanity by the late Dr. Prichard); or a perversion of all the natural feelings, affections and habits, without any assignable cause (which the same author calls *moral* insanity); or an entire absence of reason, in which the mind is more or less annihilated—in other words, *dementia*. The usual divisions are *mania*, *melancholia*, and *idiocy*.

These three deviations from a healthy or normal condition of mind admit of varied divisions and subdivisions, according to the predominant form or character of the disease. The human mind is such a heterogeneous mass of ideas and propensities, that when reason has lost her control, they break forth in various forms and degrees, rendering thereby a lunatic asylum a chaos of ungoverned passions, hallucinations and delusions. Thus, under one roof, we find one man singing, another reciting, another standing apparently absorbed in thought, another melancholy and mute, another walking hurriedly and muttering incoherently to himself, another full of tricks and mischief—all and each of them regardless and unconscious of the absurdity of their deport-

ment, and holding no intercourse with their companions, but each playing a part in the waking dream of his own disordered imagination. You are in a group of wakeful somnambulists: some will answer you if spoken to; others will remain obstinately silent; some will give not only a rational but a shrewd reply. Nor do madmen always lose the power of reasoning; on the contrary, they are frequently most acute, but their *data* are erroneous: they labor under delusions—and their imaginations convert fancies into realities, and so betray the imperfection of their intellect; for, being regardless of censure or ridicule, they have no concealment, and therefore reveal their hallucination, and are kings, or deities, or statesmen, or poets, or anything else that may be prompted by their visionary impression; and it is in vain to attempt by force of argument to controvert the impression. This “tyranny of fancy’s reign” is most vividly portrayed by that transcendent delineator of the human mind, Hogarth, who, in his last painting of the *Rake’s Progress*, has represented the diversity with painful fidelity.

Can we, then, approach any nearer to a definition of insanity, asks Dr. Conolly (an authority which admits no question and requires no praise) than by saying that it is the “impairment of any one or more of the faculties of the mind, accompanied with, or inducing, a defect in the *comparing* faculty.” These self-styled kings, or statesmen, or whatever be their delusion, are unable to compare their assumed condition with the dress, or the society, or the situation in which they exist. Their reasoning faculty may not be wholly lost, but they are blind to the absurdity of their assumption. Their *data* are erroneous, and what reasoning powers they may possess are exercised on the vision of their imagination. Converse with them on other topics, and they may appear very rational beings; yet in each case there is a diseased state of mind; and this insane belief (arising as it does from a want of power to compare things which *are* with things which *are not*) constitutes their insanity.

Dr. Millingen attended a judge in the West Indies who fancied himself a turtle! This ridiculous impression did not prevent him from sitting on the bench, nor from the fulfilment of his judicial office.

There is no end to the variety or extravagance of delusions in this class of lunatics. A patient now in Mr. Tomkins’s asylum at Witham, in Essex, though he answers rationally when you converse with him, is tortured day and night with the impression that he has little devils in his stomach, and that they talk to him and tease him. He was actually crying with the vexation when I visited him last week, and asked me if I could not hear them. Even Luther fancied the devil was in him, and that he heard him speak. Dr. Ferriday of Manchester, Dr. Elliotson informs us, had a patient who imagined that he had swallowed the devil; and so benevolent was he in his feeling, that he would not discharge the contents of his alimentary canal, lest he should let him loose on the world. Bishop Warburton, in a note to one of his works, speaks of a person who thought he was converted into a goose-pie; and Dr. Arnold saw a man who fancied himself in the family way. Even the celebrated Pascal was the subject of a false delusion, and was so entirely

impressed with the apprehension of being on the edge of a precipice that was before him, that he insisted on being tied into his chair. This was, as Shakspeare forcibly expresses it in Macbeth—

“A false creation
Proceeding from the heat-oppressed brain.”

Very many highly interesting instances are detailed in Dr. Conolly's “Inquiry into the Indications of Insanity,” all tending to show how persons may be deranged on *one* or more subjects, while the rest of the faculties are sound; or how they may be deranged on *every* subject—in which case they display a wild association of ideas and inconsistencies.

Their *propensities* also break forth in exaggerated disorder, and the depravity of their feelings is often variously manifested, whilst their intellectual faculties are comparatively little affected. They have sudden impulses, and probably destroy their children, or their nearest relations, or their sovereign, and with, perhaps, the best possible intentions. A strong instance of this occurred in the person of Hatfield, and with which I will conclude this catalogue of examples; but it is combined with such an extraordinary instance of memory, that it is deserving of record. The late Mr. Baron Garrow asked me, in the year 1825, to visit Bedlam with him. On entering the hospital, accompanied by Mr. Wright, the resident medical attendant at that time, and hearing from him that Hatfield was still there, and that we should see him, Baron Garrow cautioned us not to mention his name, observing, at the same time, that he was counsel for the prosecution on Hatfield's trial, although from the circumstance of twenty-five years having elapsed, and his never having seen the prisoner either before or since that time (and then, of course, only in his wig and gown), it was not to be expected that he should be recognized. Scarcely, however, had we been three minutes in his apartment, when Hatfield, fixing his fierce eye upon the Judge, asked him if his name was not Garrow? On being answered in the affirmative, Hatfield said, “Then, Sir, I have one favor to ask of you, which is, that as you were instrumental in getting me imprisoned here, you will exert yourself to get me set at liberty!” Garrow then asked him why he had committed this act of high treason on a king who was so highly respected and beloved? To which Hatfield replied, “Because I wished to make a *God* of him!” Many parents have murdered their children from similar infatuations, or to rescue them from a sea of sublunary cares and privations; and the newspapers of the present day have been recently stained with some of these unnatural records.

In very many instances the seat of irritation appears to be in the cerebellum; and all feelings of morality and decorum are prostrated at the shrine of concupiscence. This form of the disease generally leads to a state of futility, and terminates in epilepsy, convulsions and paralysis. In cases of insanity generally, but perhaps more especially in cases of this character, I have observed a peculiar effluvia to proceed from patients; so much so, that were I to be unconsciously placed where several are congregated, I could at once detect my position. This peculiarity does not appear to be generally noticed by authors, and may

probably be occasioned by the influence of the disordered brain on the secretions, unconnected with any want of cleanliness.

To enter into all the divisions and subdivisions of different authors, in their attempts to classify the various forms in which insanity presents itself, would be a work of supererogation in a lecture, and a tedious occupation of attention and of time. Regnault, in his "*Compétence des Médecins*," says—"Les médecins ont voulu classer les Nuances de la Folie, c'est à dire des choses aussi peu susceptibles d'être classées que les Nuages ! Quel en a été le resultat ? C'est que des mots Grecs ont été substitués à des mots Français, intelligibles pour tout le monde, et des idées contradictoires réunies dans le même mot !" Medical jurists usually class the different forms under the four heads of mania, monomania, dementia, and idiocy. Nevertheless, medical jurisprudence too frequently enters into subtleties which only serve to perplex a jury, who, from never having given their attention to mental pathology, are of course entirely ignorant of its varieties. These distinctions are occasionally required on a cross-examination by a barrister, with a view to obtaining a verdict for his client, by ingeniously upsetting the evidence which has been elicited by the opposite counsel: he endeavors to entangle the medical witness in the snare of *definition*—a Charybdis in which the unhappy victim will in all probability be swamped—"a question which," Dr. Paris observes, "a medical witness is always called upon to answer," it being very difficult to define the invisible line which divides perfect and partial insanity; or he runs him upon the rock of *lucid intervals*.

"To constitute insanity it is not necessary," as Dr. Male says, "to exhibit the ferocity of a wild beast, nor to perform the antics of a buffoon"; they speak for themselves. The grand question in a court of law is to decide whether a party be of sufficiently sound mind to manage his property, or (on being tried for murder or other violation of the laws) whether he was conscious of the crime he was committing—whether (in other words) he was in such a state of mind as to render him a responsible agent. The verdict (according to Sir Matthew Hale) "must rest upon circumstances duly to be weighed and considered, both by the judge and jury, lest, on the one side, there be a kind of inhumanity towards the defects of human nature; or, on the other side, too great an indulgence given to great crimes."

That it frequently requires close study, acute perception, great tact and considerable experience, to arrive at a just discrimination, must be admitted by every one. In addition to which, several interviews may be indispensable before a physician can give a satisfactory opinion; for lunatics are extremely cunning. Many have lucid intervals (excepting in a state of utter idiocy or imbecility), and their state of mind varies under different circumstances and positions; so much so that a commissioner would incur a heavy responsibility who should decide a testamentary dispute, or subject a criminal to execution, or even discharge a patient from confinement, without ample previous opportunities of interview and investigation. The physician must adopt his own plans for the attainment of what is required of him, and may bear in mind that which was suggested by Shakspeare in Hamlet:—

"Bring me to the test,
And I the matter will record, which madness
Would gambol from"—

a test which Sir Henry Hallford states that he found efficient, and which he instances in his Essay on the subject. Professor Taylor also wisely observes, in speaking of wills made by old persons, where, in consequence of alleged imbecility, some disappointed expectant has disputed the will:—"If a medical man be present when the will is made, he may easily satisfy himself of the state of mind of the testator, by requiring him to repeat from memory the way in which he has disposed of the bulk of his property. If a dying person cannot do this without prompting or suggestion, there is reason to believe that he has not a sane and disposing mind."—(p. 660.)

[To be continued.]

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, NOVEMBER 26, 1851.

WE would call the attention of our readers to the following circular. Many of them have it in their power to impart information respecting the treatment of hernia, and it is hoped they will not fail in forwarding it as requested. The character and standing of the Committee are a sufficient warrant that such assistance will be so used as to make their report more complete, and therefore more honorable and useful to the Association who appointed them, and to the profession at large.

American Medical Association.—Committee on the Radical Cure of Reducible Hernia.

TO THE MEMBERS OF THE MEDICAL PROFESSION THROUGHOUT THE UNITED STATES.—The undersigned are a Committee of the American Medical Association, to report on "the radical cure of reducible hernia." They are desirous of obtaining from their professional brethren any information that is calculated to throw light on this important and interesting subject.

They therefore take the liberty of proposing the following questions. An answer to any or all of them, or any facts connected with the branch of surgery on which they are directed to report, would be gratefully received.

1st. Have you been in the practice of treating reducible hernia with a view to its radical cure?

2d. Have you ever performed any surgical operation for this purpose?

3d. If so, please to describe the operation and the mode of performing it.

4th. What proportion of cases, of all in which you have operated, has been cured?

5th. Have any alarming or fatal effects, in any instance, been caused by the operation?

6th. If so, please to describe them.

As the Report must be made at the Annual Meeting of the Association, to be held in Richmond, Va., in May next, it is desirable that the answers

to the above questions should be forwarded to any one of the Committee on or before March 1st, 1852.

GEO. HAYWARD,
J. MASON WARREN, } Committee.
S. PARKMAN,

P. S.—Editors of Medical Journals and publishers of newspapers, throughout the United States, are respectfully requested to give the above an insertion in their respective Journals.

Boston, November 26th, 1851.

Medical Society of North Carolina—Miasmatic Origin of Diseases.—

Within a few days, a discourse delivered by Charles E. Johnson, M.D., before the Medical Society of North Carolina, at its second anniversary meeting at Raleigh, in May last, has been placed at our disposal and read with much interest. It takes high and novel ground in regard to the current doctrine of the miasmatic origin of disease. It is gratifying to meet with originality of thought, even in cases where the reasoning fails to gain the assent of our judgment. In the pamphlet alluded to, the author, like a skilful angler, keeps moving the hook about, from one point to another, through many pages, so that it is difficult to know what he is after; but all at once he jerks the line, and the unsuspecting reader finds himself hooked to a new theory—or no theory at all, and for the life of us we cannot determine which. It consists mainly of the denial of the generally accredited doctrine that miasm is the direct cause of a numerous list of maladies, including fevers of the most formidable type. Dr. Johnson speaks with a firmness indicative of the possession of as much proof as any controversialist might wish to encounter. With peculiar caution he gives the results of the inquiries of men distinguished for their researches on this subject, and then comes to a conclusion, in these words,—“Such is the view of this subject, which I have thought proper to present for your consideration; and these the facts which the brief space allotted to an address of this kind, has permitted me to bring forward in support of my position. Nevertheless, I believe they will, under the operation of the rule which I have laid down for our government in the study of all questions in physical etiology, the scientific value and applicability of which no one can deny, furnish sufficient evidence to convince us that there is no truth in the doctrine of the miasmatic origin of diseases.” Here is heterodoxy, and we shall turn the daring author over to the tender mercies of those who make it their particular business to watch for the safety of old theories. In the meanwhile, if Dr. Johnson will give his own views of the origin of intermittents, he will furnish those who are disposed to question his propositions, with data to reason upon; but as the matter now stands, there is not a single projecting point, not a prominence to hang an argument upon. Smooth as an ivory ball, there is nothing in his doctrine to grasp at, without taking the whole. It is far easier to knock away the ladder by which ascent has been made to an elevated position, than to provide other means of reaching the same height.

Beck's Materia Medica.—A touching act of friendship accompanies the publication of the lectures on *Materia Medica* and *Therapeutics* by the late learned and lamented John B. Beck, M.D., a Professor in the University of the State of New York, that will be the brightest page in the life of the editor of the volume, C. E. Gilman, M.D., Dr. Beck's associate pro-

essor. It appears that Dr. Beck had partly prepared his lectures for the press, but was prevented by death from finishing them. This was a difficult undertaking for any one else, especially one who, like Dr. Gilman, had given his time and attention to other thoughts and a different sphere of professional usefulness. He frankly explains how little he has done, which gives him a higher claim to consideration. The fact is, although furnished with a faultless manuscript as far as it went, no person, without his warm sympathies, would have given it the same finishing tone of excellence. The book is a generous octavo, of five hundred and eighty pages. The arrangement of the various subjects is similar to that of the majority of writers on *Materia Medica*—the natural divisions being those of emetics, cathartics, anthelmintics, sialagogues, &c., which are copiously treated, and in which the current knowledge of the day, pertaining to medicinal agents, gathered from all languages, is spread out before the reader. Dr. Beck was remarkable for his patient investigation, honesty of purpose, and devotion to the interests of the profession. As a memorial of a learned and judicious instructor, these published lectures should be possessed by those who were educated at the school of medicine in which he taught with such eminent ability. And here we perceive the great importance of writing one's thoughts, but above all one's experience. How many physicians go down to the grave, to be there forgotten, who were oracles while living, and whose experience, even when dead, would have benefited the world, had they contributed by their pen, as all are bound to do, something to the accumulating mass of human wisdom. Dr. Beck labored for all coming generations, and his recorded words, and facts, and suggestions, are destined to influence beneficially other minds, even when the particular circumstances of his professorial position are blotted from all memories.

Natural History of the Human Species.—To Messrs. Gould & Lincoln, of this city, are the learned indebted for an American edition of Col. Charles Hamilton Smith's comprehensive work on the *Natural History of the Human Species*, its typical forms, primeval distribution, filiations and migrations. A new feature of the volume, giving it an additional interest, is a preliminary, elaborate abstract of the views of Blumenbach, Prichard, Buchan, Agassiz, and others, on the same subjects, by S. Kneeland, Jr., M.D., of Boston. It is this part of the book that will disturb those philosophers who fully believe that the present globe, with all its teeming wonders, was literally completed in six days of twenty-four hours each; and worse still, for some others, it conveys the idea that we are not all lineal descendants of Adam and Eve. Dr. Kneeland has collated, simply, the opinions of distinguished naturalists, who argue that the different races of men had an independent origin. Leaving the volume here, for the present, we recommend it to the study of all who have an interest in the problem of the natural history of man.

History of the Mass. General Hospital.—N. I. Bowditch, Esq., is the author of one of the best printed volumes that we have seen, relating to the history of the best conducted hospital in the country. Desirable as it would be to many to have it as a constant book of reference, strange to say, it has not been published, and is not to be purchased. The author has concentrated a large amount of statistical facts relative to the progress

of the institution from its incipency to the present moment, when it is strong in resources, and the pride of the city in which it is located. The grand total of all the property bestowed upon the Massachusetts General Hospital, is assumed by the historian to be *one million and a quarter of dollars*.

New Medical Works.—Although each of the following books has been noticed in a manner that shows how much we prize them, this additional notice will refresh the memory of professional readers, in regard to works which will be found serviceable to all. There have been recently published—De La Beche's Geology, Beale on Health, Horner's Anatomy, Malgaigne's Surgery, Carpenter's Elements of Physiology, Dunglison's Medical Dictionary, and MacLise's Surgical Anatomy. They are all from the press of Messrs. Blanchard & Lea, of Philadelphia, whose reputation for bringing out the best of books, and in the best style, is a warranty for their character.

Microscopic Preparations.—Dr. Durkee, of this city, has been eminently successful in the management of that beautiful instrument, the microscope, which gives him peculiar advantages in his researches upon the diseases of the skin. Some of his minute preparations of the textures fully equal the French and German specimens. It gives us much gratification to speak of Dr. Durkee's success in this department of scientific investigation.

Bronchial Syringes.—Dr. Ira Warren is the inventor of several instruments for the application of medicinal remedies to the throat, which are not only quite new in pattern, but beautiful in workmanship. The barrels of each syringe are of glass; but the pipes are of silver, of different lengths and curves, and terminated by small perforated balls. With this construction, any part of the air passages may have the full benefit of solutions, more effectually than by the methods usually practised. The new method of treating bronchitis has been extensively adopted, and if it is to be continued, the probang and other contrivances heretofore resorted to will in many cases be superseded by these ingenious instruments. Those having a curiosity to examine them, are invited to do so, a case being in the possession of the editor for that purpose.

Philosophy of Health.—L. B. Coles, M.D., of Boston, has brought out the *twenty-sixth* edition of a popular little work called the "Philosophy of Health." Such eminent success in authorship is almost unparalleled. It would seem as though the friends of reform not only read, but eat the books, to create such a demand. We intend to search the work through, and discover, if possible, what there is in it that creates such a bibliographical appetite.

Life Insurance Explained.—A bi-monthly, entitled Lectures on Life Insurance, addressed to families, &c., by Moses L. Knapp, M.D., has been commenced at Philadelphia. It would be a great field for exploration, were any one disposed to say all that might be written on this subject.

Medical Miscellany.—Wm. Fontane recently died in Florida, at the age of 105.—Scarlet fever is quite fatal at Alexandria, Va.—The death of a

woman at Montville, Conn., at 102, in perfect health to the last, shows that longevity may occur in our northern climate.—Dr James A. Ogle has been appointed, by the Queen of England. Professor of Physic in the University of Oxford, in place of the late Dr. Kidd.—Medical Lectures at Hampden Sydney College have commenced under flattering auspices.—At the University of Virginia 100 students have been matriculated; as many as they desire, under the system of instruction adopted in that institution.—A new medical organization is maturing, of a Society, to meet at Richmond, Virginia, in April next.—Dr. Mandeville Thum is to deliver the address before the Alumni of Hampden Sidney Medical College, in the Spring.—Prof. Agassiz is lecturing on Comparative Anatomy at the Medical College of South Carolina.—The National Medical College, at Washington, has been opened for the season, and a course of medical lectures has also been commenced at the Georgetown (D. C.) College.—An ounce of quinine was given in twelve hours, in a case of congestive fever, to a negro, at Hillsboro', N. C., which, instead of killing, nearly cured him!—Chloroform was given to a bear in a menagerie at Berlin, preparatory to couching one of his blind eyes; when the operation was finished, the huge animal was stone dead.—It has been conjectured that fevers are confined, in England, to districts where blue clay succeeds the chalk formation.—The expressed juice of *nepeta cataria*, common catnip, is strongly recommended as an emmenagogue, given in doses of a tablespoonful, twice a day.—Dr. E. Coolidge Richardson, of Ware, Mass., extirpated a malignant tumor from the breast of a lady in that town, a short time since, that weighed three pounds and one ounce. The patient is prosperously recovering.—A lawyer fell dead lately in a fit of passion, at Richmond, Va.—Dr. Farnham, says the North-Western Med. and Surg. Journal, convicted of conspiracy against the Michigan Central Railroad, and sentenced to the penitentiary, is not a physician. His title arises from the fact that he has been practising dentistry. The man whom the papers style Dr. Fitch, implicated in the same crime, was a farmer, and never laid any claim to, or received the title of, doctor, until after the trial commenced. The only physician indicted was found innocent and set at liberty.—It is said that there are over 200 medical students at the free Medical College of Michigan.

Suffolk District Medical Society.—The Monthly Meeting for Medical Improvement of the Suffolk District Medical Society will be held at their rooms, Masonic Temple, on Saturday evening, Nov. 29th, at half past 7.

TO CORRESPONDENTS.—Prof. Bryan's translation from the French, and Dr. Colby's remarks on Dislocations, are on file for publication.

MARRIED.—Dr. John Ellis, of Detroit, Michigan, to Miss S. M. Leonard.

DIED.—In England, John Kidd, M.D., Regius Professor of Medicine, Oxford.—Dr. K. N. Hall, Henrico Co., Va., by suicide.

Deaths in Boston—for the week ending Saturday noon, Nov. 22d, 66.—Males, 37—females, 29. Apoplexy, 1—disease of bowels, 1—inflammation of bowels, 1—burn, 1—consumption, 15—convulsions, 1—cholera infantum, 1—cancer, 1—croup, 1—dysentery, 3—diarrhoea, 1—diabetes, 1—dropsy of brain, 3—typhus fever, 4—typhoid fever, 3—scarlet fever, 1—brain fever, 2—lung fever, 6—hooping cough, 1—disease of heart, 1—infantile, 8—marasmus, 1—palsy, 1—purpura, 1—puerperal, 1—rheumatism, 1—scrofula, 1—teething, 1—unknown, 3.

Under 5 years, 30—between 5 and 20 years, 6—between 20 and 40 years, 16—between 40 and 60 years, 10—over 60 years, 4. Americans, 30; foreigners and children of foreigners, 36. The above includes 10 deaths at the City Institutions.

Transactions of the American Medical Association.—Circular by the Committee of Publication.—SIR: The Committee of Publication respectfully submit to you, as a Member of the American Medical Association, the following statement:—

The whole amount received from the assessment for 1851 has been about six hundred dollars, which, with the balance in the treasury at the last report (four hundred dollars), makes one thousand dollars.

It is estimated that the cost of Vol. IV. will be about seventeen hundred dollars; the expense of printing the Reports being one thousand dollars, and of the Prize Essay, with the necessary illustrations, nearly seven hundred dollars.

This last, which was awarded the prize of one hundred dollars, and which the Association ordered to be published in the Transactions, is a work of great merit, exhibits extensive research, and is illustrated with numerous beautiful drawings, a number of them colored. The publication of this essay will do credit to the Association, and tend to elevate the scientific character of the American Medical Profession. But the Committee are without the means for that purpose, and they appeal to the Association to furnish them. A large number of copies of the three volumes already published remain unsold, and, if the members will complete their sets, and use their influence to extend the sale of these volumes, the required sum may be readily raised.

The Committee call the attention of the Association to the terms upon which the published volumes are now furnished to Members, or to Societies which have been represented in the Association:

Either of the first three volumes separately (in paper covers), \$1 50; a complete set in three volumes (paper covers), \$4 00; a complete set in three volumes (cloth), \$5 00; single copies of vol. iv. (to permanent members), \$2 00; three copies of vol. iv. (to permanent members), \$5 00.

In all cases the amount must be remitted to the Treasurer of the Association, Isaac Hays, M.D., Philadelphia.

Your earliest possible attention to the above is earnestly solicited, to avoid great delay in the publication of the forthcoming volume of the Transactions.

ISAAC HAYS, M.D.,

Chairman of the Com. of Pub. American Med. Association, and Treasurer.

Philadelphia, Aug. 1, 1851.

Dysentery at the West.—The following we extract from a letter from W. H. Martin, M.D., of Rushville, Ind.

"We have had a great deal of dysentery to contend with this season. Many cases were of a severe character, and, strange as it may seem, we have lost but one case. We depended chiefly on opium, and injections of sol. starch, acet. plumbi and thebeaia tinct., assisted by hot straps, made by wringing flannel out of very hot water and then moistening the surface with turpentine. Many of our cases were ushered in by very severe vomiting. We found nothing so prompt in arresting this condition of the stomach as small doses of the proto chlor. mercury, say $\frac{1}{2}$ grain, exhibited dry and washed down with a mouthful of elm water, every 20 or 30 minutes, according to the severity of the vomiting, and until it ceased. I do not now recollect a case that resisted this treatment; and I know of but one or two that were in the least pyralized."—*North Western Med. and Surgical Journal.*

MEDICAL JOURNAL ADVERTISING SHEET.

TREMONT STREET MEDICAL SCHOOL.
11 BOSTON, OVER 33 TREMONT ROW.—The annual course of instruction in the Tremont School commences this year on the first day of September.

This School was instituted in Boston, in 1838, for the purpose of giving to private pupils a thorough course of instruction, by lectures and examinations, throughout the year. Two hundred pupils, including a large part of the recent academic graduates of Harvard University, who have devoted themselves to the study of medicine, and many others from all sections of the country, have received their professional education, or some portion of it, at this institution. By an act of the Legislature a charter has been conferred upon this School, which is thus enabled to avail itself of all the privileges which the laws of the State have conferred or may hereafter confer upon incorporated medical institutions.

Exercises in the different branches are given daily or oftener, from the close of the University lectures in March, until their commencement in November, with the exception of the month of August, during which most of the usual labors of the School are suspended. During the session of the University Medical School, examinations are held three times weekly on the subjects of the lectures.

The following gentlemen are instructors in this School, during the present year, in the several departments of medical science, forming a complete and thorough course.

JACOB BIGELOW, M.D.
 D. HENRY STORER, M.D.
 J. B. & JACKSON, M.D.
 OLIVER W. HOLMES, M.D.
 HENRY J. BIGELOW, M.D.
 SAMUEL C. STORER, M.D.
 SAMUEL KNEELAND, M.D.

Practical Anatomy is taught under the immediate direction of the Teacher of Anatomy and Physiology, assisted by the Demonstrator of the Medical School of the University. Ample means of pursuing this important branch of study, and for the practice of the more important surgical operations, are provided without additional expense to the student.

CLINICAL INSTRUCTION.

This essential branch of a medical education is made an object of especial attention. There will be clinical visits at the Massachusetts General Hospital, in the Medical Department, by Drs. Bigelow, Jackson and Storer, with Lectures at stated intervals; and constant attention to the practical study of Auscultation and Percussion, for which ample opportunities occur in the practice of the Hospital.

Clinical Instruction in Surgery will be given at the same institution by Dr. Henry J. Bigelow.

Ample opportunities are afforded for experience in Obstetric practice.

PUBLIC INSTITUTIONS.

In addition to the medical and surgical practice and operations of the Massachusetts General Hospital, the Students will have admission to the Eye and Ear Infirmary, through the politeness of the Surgeons of that institution; and also to the institution for the treatment of Diseases of the Skin, by permission of Dr. Durkee.

MEANS OF ILLUSTRATION.

The large collections of healthy and morbid specimens in the Warren Anatomical Museum, and the Cabinet of the Boston Society for Medical Improvement, will be made available for the purposes of instruction under the direction of Dr. Jackson, the Curator of both these collections.

LIBRARY.

During the whole Summer term, the Students of the Tremont Street Medical School will have free access to, and the privilege of taking Books from the Library of the Massachusetts Medical College, now consisting of about 1500 volumes, and rapidly increasing by a large annual appropriation, devoted to the purchase of Books most useful and acceptable to the Student.

* Application may be made to Dr. BIGELOW, Summer Street, Boston. A new Catalogue of the past and present Members of the School, with other details, may be had gratis, by applying, post-paid, to Mr. Burnett, Apothecary, 33 Tremont Row, at W. D. Ticknor's Bookstore, or at the Med. Journal Office.

The Room of the School, at 33 Tremont Row, over Mr. Burnett's Apothecary store, is open to Students from 8 A. M. to 10 P. M., furnished with Plates, Preparations, Articles of the Materia Medica, &c.

For the Summer Term (from March 1st to November 1st), \$30. For the Winter Term (from November 1st to March 1st), \$10. For a Year, \$100.
 Boston, August, 1851.

TINCTURES from English leaves of Hyoscyamus, Conium, Digitalis, Belladonna, and Aconite. Tinct. Indian Hemp. These Tinctures are of official strength. Sold by **PHILBRICK, CARPENTER & CO.** Nov. 6.

DENTAL AND SURGICAL INSTRUMENTS.—**D. WALTHER & CO.**, successors to N. Hunt, manufacture and have for sale all kinds of Surgical and Dental Instruments and Implements. Old instruments ground, polished and repaired, at the shortest notice.

Orders will be attended to with promptness.
 May 22—11 125 Washington street, 2 stairs.

WINE OF COLCHICUM ROOT.—Sold by **PHILBRICK, CARPENTER & CO.** Nov. 13.

PREPARATIONS OF SILVER.—Nitrate in Crystals, Oxide, Iodide and Chloride, manufactured and for sale at 160 Washington street, Boston, by **PHILBRICK & TRAFTON, Chemists.** Nov. 13.

PROTEIN.—Sold by **PHILBRICK, CARPENTER & CO.** Oct. 16.

DR. HEATON'S HERNIA INFIRMARY, BOSTON.—Dr. H. having returned from Europe, will receive patients as formerly. He continues to attend particularly to the nature and speedy cure of Hernia or Rupture, Varicocele, Scrotocele, Hydrocele, &c.; also to diseases of females. Trusses are dispensed with in all cases.

Applications must be made at his office and residence, 2 Exeter Place, Boston. July 24.

SMITH & MELVIN'S LIQUID EXTRACT OF OPIUM.—Containing all the desirable Alkaloids of Opium, in a natural state of combination, purified and rendered permanent.—The want of a uniform preparation of Opium which should take the place of Laudanum, as usually prepared, has been long felt by physicians and others. Having been daily reminded, in dispensing medicines, of the uncertain strength, as well as objectionable qualities, of several preparations of this important drug, the subscribers were led to substitute for these a refined chemical solution, prepared by them, of all the active medicinal constituents of Opium, rejecting the Narcotine and other deleterious compounds.

This Fluid Extract is a solution of the Salts of Morphine, Codeine, Thebaine, Narcotine and Meconine, with Meconic and Malic Acids, in the same proportions as they naturally exist in the best Opium. They are extracted without change of composition, or addition, and rendered permanent in this form. Narcotine, and other exciting and deleterious compounds existing in the Opium, are completely removed. While, therefore, it possesses all the valuable properties of the Salts of Morphine, it has the higher claim of possessing the properties of the unadulterated drug for exhibition in cases not under the control of Morphia Salts.

Its strength is precisely that of the original official Laudanum, and this standard, accurately fixed, will be maintained in all the parcels bearing our signature. The purchaser will therefore obtain the native Morphia Salts at a lower price than that of the artificial, and will enjoy a less repulsive remedy than Laudanum, with entire freedom from the derangement which artificial Morphia Salts often produce. Its anodyne action on the system is the same as that of the English Black Drop, while the debilitating and relaxing effects of that preparation are not produced by its continued use.

SMITH & MELVIN, Apothecaries,
 325 Washington Street, Boston.

April 9.

Certificate from Dr. A. A. Hayes.—"I have been requested by Messrs. Smith & Melvin, to analyse their preparation of the Salts of the Alkaloids in Opium, called *Liquid Extract of Opium*, and to examine their processes for preparing it.

This new medicinal preparation is the result of a beautiful pharmaceutical method, exhibiting both chemical and professional knowledge, applied with great skill and care. As stated by them, I find the *Liquid Extract* has been divested of Narcotine, and those substances deemed poisonous—certainly highly repulsive—while the natural Salts existing in Opium are retained in a nearly pure state.

I can most confidently recommend this as the best of the known compounds of the Opium Alkaloids, and the only one in which they are unaltered and rendered permanent.

Respectfully, **A. A. HAYES, State Assayer.**
 1 Pine Street, Boston, 1st May, 1850."

aug 27—11

MEDICAL JOURNAL ADVERTISING SHEET.

RARE CHANCE FOR A PHYSICIAN.—A physician in Maine, with a practice of \$2,500 a year, offers to sell out on reasonable terms. Apply at this office. N19-11.

DR. WILLIAMS will commence his Annual Course on Ophthalmic Medicine and Surgery, on Thursday, November 10th, 1881.

At the Clinical and other lectures, which will be illustrated by a large number of cases, gentlemen will have opportunities for becoming practically familiar with the diagnosis of the various forms of Disease of the Eye, and with the application of remedies.

Opportunities for witnessing operations will also be given.

Terms—Five dollars for the course of two months. The first meeting of the class will be at Dr. Williams's residence, No. 23 Essex Street, on Thursday, November 10th, at 3 1/2 o'clock, P. M. N12-41.

COPARTNERSHIP NOTICE.—The Copartnership heretofore existing between the subscribers under the style and name of *Philbrick & Trafton*, is this day dissolved by mutual consent.

The business of the late firm will be settled by S. R. Philbrick, at 150 Washington street.

June 12, 1881.

S. R. PHILBRICK,
C. T. TRAFTON.

The undersigned have this day formed a Copartnership, under the firm of *Philbrick, Carpenter & Co.*, and will continue the Drug Business (heretofore conducted by Philbrick & Trafton), at 150 Washington street, Boston.

June 12, 1881.

June 18-11.

PURE CHLOROPFORM.—For sale by JOSEPH BURNETT, Apothecary, No. 33 Tremont Row. Jan. 5-11

GENUINE MUSK in pod; True Russian Castor; Scammony; Gen. Burgundy Pitch; French Iodine; German Quinine; Iodine Potassa; Sugar of Lead, chemically pure; English Croton Oil. Just received by PHILBRICK, CARPENTER & CO., 150 Washington street, Boston. Aug 6

FRESH AND GENUINE DRUGS AND MEDICINES of a superior quality, carefully prepared for physicians' use, and for sale on the most favorable terms, at 33 Tremont Row, Boston, by JOSEPH BURNETT.

Feb. 10-11

(Successor to T. Metcalf.)

NAPHTHALINE.—A new remedy highly recommended by M. Dupesquier, M. Raasignon and M. Emery, in various pulmonary complaints. Manufactured and for sale by PHILBRICK, CARPENTER & CO., Chemists, 150 Washington street, Boston. 847

MATICO.—A fresh supply just received and for sale by JOSEPH BURNETT, No. 33 Tremont Row. Mch 17-11

IMPROVED UTERO-ABDOMINAL SUPPORTERS.—The subscriber would inform medical gentlemen that he continues to manufacture his improved "CHAPIN'S Abdominal Supporters," and they can be furnished with this instrument (which has been found so useful in cases of proclivitas and prolapsus uteri, abdominal and dorsal weakness, as well as in cases of prolapsus ani, &c.), viz. from \$2.50 to \$10.00, according to quality. Perineum straps, necessary in some cases (extra), at 50 cts. to 75 cts. The measure of the patients to be taken around the pelvis in inches.

Reference may be had to the following physicians in Boston, among others, who have had practical knowledge of its utility:—Dr. John C. Warren, W. Channing, Geo. Hayward, J. Ware, E. Reynolds, Jr., J. Jeffries, J. V. C. Smith, W. Lewis, Jr., J. Homan, J. Mason Warren, &c.

The Supporters, with printed instructions for applying the same, will be furnished and exchanged until suitably fitted, by application personally, or by letter, (post-paid) to

A. F. BARTLETT,
No. 221 Washington st., Boston,
(op. Med. Jour. office.)

The above may also be obtained of Messrs. James Green & Co., Worcester; G. H. Carleton and James C. Ayer, Lowell; William F. S. Caldwell, New Bedford; Bagg & Co., Cabotville, in Maine; Joshua Durgin & Co., Portland; G. W. Ladd and Aaron Tamm & Co., Bangor; Eben Fuller, Augusta; Wm. Dyer, Waterville; J. Balch, Providence; R. I. Andrew Trux, Schenectady, N. Y.

Jan. 1-1881

DR. H. W. WILLIAMS has removed to No. 23 Essex Street, opposite Rowe Street. Particular attention given to DISEASES OF THE EYE. Nov. 3-eph

DR. J. V. C. SMITH, Editor of this JOURNAL, may be found at his Office, in the basement of the Tremont House, Tremont Street. Nov. 3.

PHILBRICK, CARPENTER & CO. (late Philbrick & Trafton), PHYSICIANS' DRUGGISTS AND CHEMISTS, (Members of the Massachusetts Medical Society,) 150 Washington street, Boston.

S. R. CARPENTER, M.D.,
S. R. PHILBRICK, M.D.,
L. Atwood, Chemist.

July 18

PHILOSOPHICAL AND CHEMICAL GLASS WARE. (Bohemian Glass.)—Wash's Bottles, Retorts, Bell Glasses, Precipitating Jars, Chemical Flasks, Beaker Glasses, Assay Jars, will be in store Jan. 1st, 1881, and will be sold to Physicians and others upon the most favorable terms, by Nov. 15. PHILBRICK, CARPENTER & CO.

SARATOGA POWDERS—or Rochelle, Seidlitz, and Soda Powders, one package equal to six boxes of the above—price 15 cents. These will be found a great convenience to travellers, never residing in the country, invalids, and to all deprived of a soda fountain. Put up and sold by J. RUSSELL SPALDING, 23 Tremont Row, opposite Boston Museum. April 30-11

TOBACCO OINTMENT, COMPOUND.—Prepared and sold by PHILBRICK, CARPENTER & CO., Chemists, 150 Washington st., Boston. Nov. 31

NEW PREPARATIONS.—Tannate of Quinine, Chloride of Sulphur, Chloride of Arsenic, manufactured and sold by PHILBRICK, CARPENTER & CO. Oct. 16. PHILBRICK, CARPENTER & CO.

CHLOROPFORM. Concentrated Chloric and Sulphuric Ethers, for inhalation. Manufactured and sold by PHILBRICK, CARPENTER & CO., Chemists and Physicians' Druggists. Nov. 6

MEDICAL PRESCRIPTIONS.—Compounded day and night by PHILBRICK, CARPENTER & CO., Dispensers, 150 Washington street, Boston. 3716

GLASS WARE of every description, including German Bottles with accurately ground stoppers, from 1-4 oz. to one gallon. Also, wide and narrow mouthed Flasks of white and green glass, of every size and variety, for sale in quantities to suit Physicians, by PHILBRICK, CARPENTER & CO. Nov. 13

NEW UTERINE SUPPORTER.—Invented by Dr. Robinson, and far superior to his Improved Femury—not liable to break nor corrode—small, worn with ease, can be applied by the patient, and answering all purposes, where mechanical support is needed. It has been examined, approved and used by many physicians. All are invited to call and examine it. Sold only by Dr. J. H. ROBINSON, wholesale and retail, at No. 4 Montgomery Place, Boston. Jan. 22-eph

FOR SALE.—The ride of a Practising Physician, worth 1,000 per annum. The incumbent wishes to sell horse, buggy, office fixtures, &c. Possession given immediately. For further particulars, inquire of R. P. JENNESS, Saccapuss, Maine. Oct 6-11

VACCINE VIRUS.—Physicians in any section of the United States, can procure ten quills charged with Pure Vaccine Virus by return of mail, on addressing the Editor of the Boston Medical and Surgical Journal, enclosing one dollar, post paid, without which no letter will be taken from the office. Feb. 5

THE

Boston Medical and Surgical Journal

IS PUBLISHED EVERY WEDNESDAY.

At 154 Washington St., corner of Franklin St.

J. V. C. SMITH, M.D., EDITOR.

DAVID CLAPP, PUBLISHER.

Price—Three dollars a year, in advance; after three months, \$2.50; if not paid within the year, \$4. For a single copy, 8 cents.